



## Complete Summary

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### TITLE

Rehabilitation medicine: percentage of patients admitted to a rehabilitation unit/facility for whom there is documented evidence of a functional assessment within 72 hours of patient admission, during the 6 month time period.

### SOURCE(S)

Australian Council on Healthcare Standards (ACHS). ACHS clinical indicator users' manual 2009. ULTIMO NSW: Australian Council on Healthcare Standards (ACHS); 2009 Jan. 853 p.

## Measure Domain

### PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

### SECONDARY MEASURE DOMAIN

Does not apply to this measure

## Brief Abstract

### DESCRIPTION

This measure is used to assess the percentage of patients admitted to a rehabilitation unit/facility for whom there is documented evidence of a functional assessment within 72 hours of patient admission, during the 6 month time period.

### RATIONALE

The implementation of an effective rehabilitation program is dependent upon the early assessment of patient function. Such an assessment also provides a baseline from which functional improvement can be measured.

### PRIMARY CLINICAL COMPONENT

Rehabilitation medicine; functional assessment

## **DENOMINATOR DESCRIPTION**

Total number of patients admitted to the rehabilitation unit/facility with a minimum length of stay of 72 hours, during the 6 month time period

## **NUMERATOR DESCRIPTION**

Total number of patients admitted to a rehabilitation unit/facility for whom there is documented evidence of a functional assessment within 72 hours of patient admission, during the 6 month time period (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

### **Evidence Supporting the Measure**

#### **EVIDENCE SUPPORTING THE CRITERION OF QUALITY**

- A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences

### **Evidence Supporting Need for the Measure**

#### **NEED FOR THE MEASURE**

Overall poor quality for the performance measured  
Use of this measure to improve performance

#### **EVIDENCE SUPPORTING NEED FOR THE MEASURE**

Australian Council on Healthcare Standards (ACHS). ACHS clinical indicator users' manual 2009. ULTIMO NSW: Australian Council on Healthcare Standards (ACHS); 2009 Jan. 853 p.

### **State of Use of the Measure**

#### **STATE OF USE**

Current routine use

#### **CURRENT USE**

Internal quality improvement

### **Application of Measure in its Current Use**

#### **CARE SETTING**

Hospitals  
Rehabilitation Centers

## **PROFESSIONALS RESPONSIBLE FOR HEALTH CARE**

Occupational Therapists  
Physical Therapists  
Physicians

## **LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED**

Single Health Care Delivery Organizations

## **TARGET POPULATION AGE**

Unspecified

## **TARGET POPULATION GENDER**

Either male or female

## **STRATIFICATION BY VULNERABLE POPULATIONS**

Unspecified

## **Characteristics of the Primary Clinical Component**

### **INCIDENCE/PREVALENCE**

Australasian Rehabilitation Outcomes Centre (AROC) data indicates that more than 65% of episodes currently achieve a functional assessment within 72 hours of patient admission.

### **EVIDENCE FOR INCIDENCE/PREVALENCE**

Australian Council on Healthcare Standards (ACHS). ACHS clinical indicator users' manual 2009. ULTIMO NSW: Australian Council on Healthcare Standards (ACHS); 2009 Jan. 853 p.

### **ASSOCIATION WITH VULNERABLE POPULATIONS**

Unspecified

### **BURDEN OF ILLNESS**

Unspecified

### **UTILIZATION**

Unspecified

### **COSTS**

Unspecified

## Institute of Medicine National Healthcare Quality Report Categories

### IOM CARE NEED

Getting Better

### IOM DOMAIN

Effectiveness

## Data Collection for the Measure

### CASE FINDING

Users of care only

### DESCRIPTION OF CASE FINDING

Patients admitted to the rehabilitation unit/facility with a minimum length of stay of 72 hours, during the 6 month time period

### DENOMINATOR SAMPLING FRAME

Patients associated with provider

### DENOMINATOR INCLUSIONS/EXCLUSIONS

#### Inclusions

Total number of patients admitted to the rehabilitation unit/facility with a minimum length of stay of 72 hours, during the 6 month time period

#### Exclusions

Unspecified

### RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

### DENOMINATOR (INDEX) EVENT

Institutionalization

### DENOMINATOR TIME WINDOW

Time window brackets index event

### NUMERATOR INCLUSIONS/EXCLUSIONS

**Inclusions**

Total number of patients admitted to a rehabilitation unit/facility for whom there is documented evidence of a functional assessment\* within 72 hours of patient admission, during the 6 month time period

*\*Assessment of function* should include both cognitive and physical function through the use of a standardised instrument (such as FIM(TM), Barthels Index, Mini Mental State Examination [MMSE]).

**Note:** Assessment is completed when the last item of any assessment is completed and the time stamp should be the date on which this occurs. Even if the recording of this date happens on a day subsequent to the day the last item of any assessment was completed, the date recorded must be the date the last item of any assessment was completed.

**Exclusions**

Unspecified

**MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS**

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

**NUMERATOR TIME WINDOW**

Fixed time period

**DATA SOURCE**

Administrative data  
Medical record

**LEVEL OF DETERMINATION OF QUALITY**

Individual Case

**PRE-EXISTING INSTRUMENT USED**

FIM(TM), Barthels Index, Mini Mental State Examination (MMSE)

**Computation of the Measure****SCORING**

Rate

**INTERPRETATION OF SCORE**

Better quality is associated with a higher score

**ALLOWANCE FOR PATIENT FACTORS**

Unspecified

## **STANDARD OF COMPARISON**

External comparison at a point in time  
External comparison of time trends  
Internal time comparison  
Prescriptive standard

## **PRESCRIPTIVE STANDARD**

Whilst the achievement of 100% is ideal, it is acknowledged that a facility/unit may not be able to achieve this. A performance benchmark of at least 80% should be target.

## **EVIDENCE FOR PRESCRIPTIVE STANDARD**

Australian Council on Healthcare Standards (ACHS). ACHS clinical indicator users' manual 2009. ULTIMO NSW: Australian Council on Healthcare Standards (ACHS); 2009 Jan. 853 p.

## **Evaluation of Measure Properties**

### **EXTENT OF MEASURE TESTING**

Unspecified

## **Identifying Information**

### **ORIGINAL TITLE**

Indicator 1: timely assessment of function on admission CI 1.1.

### **MEASURE COLLECTION**

[Australian Council on Healthcare Standards \(ACHS\) Equip Clinical Indicators](#)

### **MEASURE SET NAME**

[Rehabilitation Medicine Indicators](#)

### **DEVELOPER**

Australian Council on Healthcare Standards

### **FUNDING SOURCE(S)**

Funding is direct Australian Council on Healthcare Standards (ACHS) funding sourced through our membership. ACHS does not receive external funding from the government or other sources.

## **COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE**

Our terms of reference dictate the composition of the working parties that develop our indicators and include the following:

- Two Clinicians -- nominated by the relevant specialty college/association/society, one nominated to be the chair of the working party
- Private Hospital Representative -- nominated by the Australian Private Hospital Association
- Consumer Representative -- nominated by the Consumer Health Forum of Australia
- Coding Representative -- nominated by the National Centre for Clinical classification on Health
- Quality Health New Zealand, nominated by QHNZ (if applicable)
- Epidemiological/Clinical Research Representative, Director of Health Services Research Group, University of Newcastle
- Australian Council on Healthcare Standards (ACHS) Representatives -- Clinical Director, Coordinator, Administrative Assistant
- Other Expert Stakeholders, as required

## **FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST**

None

## **ADAPTATION**

Measure was not adapted from another source.

## **RELEASE DATE**

1997 Jan

## **REVISION DATE**

2009 Jan

## **MEASURE STATUS**

This is the current release of the measure.

This measure updates a previous version: Australian Council on Healthcare Standards (ACHS). ACHS clinical indicator users' manual 2008. ULTIMO NSW: Australian Council on Healthcare Standards (ACHS); 2007 Dec. 776 p.

## **SOURCE(S)**

Australian Council on Healthcare Standards (ACHS). ACHS clinical indicator users' manual 2009. ULTIMO NSW: Australian Council on Healthcare Standards (ACHS); 2009 Jan. 853 p.

## **MEASURE AVAILABILITY**

The individual measure, "Indicator 1: Timely Assessment of Function on Admission CI 1.1," is published in "ACHS Clinical Indicator Users' Manual 2009."

For more information contact, the Australian Council on Healthcare Standards (ACHS), 5 Macarthur Street, ULTIMO NSW 2007; Phone: (02) 9281 9955; Fax: (02) 9211 9633; E-mail: [pos@achs.org.au](mailto:pos@achs.org.au); Web site: [www.achs.org.au](http://www.achs.org.au).

## **COMPANION DOCUMENTS**

The following is available:

- Australian Council on Healthcare Standards (ACHS). Australasian clinical indicator report 2001-2007. Determining the potential to improve quality of care: 9th edition. ULTIMO NSW: Australian Council on Healthcare Standards (ACHS); 2008. 611 p. This document is available in Portable Document Format (PDF) from the [Australian Council on Healthcare Standards \(ACHS\) Web site](http://www.achs.org.au).

## **NQMC STATUS**

This NQMC summary was completed by ECRI Institute on July 25, 2008. This NQMC summary was updated by ECRI Institute on June 30, 2009.

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